

## MEMORANDUM

TO: Legal Division

DATE:

FROM

SUBJECT: Spousal Impoverishment

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Following is a summary report of a couple who have established resource and/or income allowances under the spousal impoverishment provisions.

Client's Name Case Number

Spouse's Name Case Number (If Applicable) Date of NF/HCBS Entrance: Client's SSN: (Mo/Yr)

Date of Notice of Intent: Spouse's SSN: (Mo/Yr) First Month of Eligibility: (Mo/Yr)

Resource Allowance Provided:

1. Total amount of combined nonexempt resources at the time the notice of intent is signed ..... \$

2. Client's share after transfer ..... \$

3. Community spouse's share after transfer ..... \$ Income Allowance Provided:

1. Total amount of client's income prior to division ..... \$

2. Total amount of spouse's income prior to division ..... \$

3. Total amount of combined income prior to division ..... \$ (Should equal 1 & 2)

4. How much is the total spousal share ..... \$

5. How much of the client's income will be given to the spouse ..... \$

6. Total amount of income to be provided to dependent family member(s) ..... \$

7. Date income allocation began .....